

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized CommitteeRECEIVED.
SECRETARY OF THE SENATE

11 NOV -2 AM 10:52

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Democratic Senatorial Campaign Committee

ADDRESS (number and street) ▼

120 Maryland Avenue, NE

Check if different
than previously
reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00042366

3. IS THIS
REPORTNEW
(N)

OR

X

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)

(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	X Nov 20 (M11) (Non-Election Year Only)
	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)
	Convention (12C)	Special (12S)	

Election on	M M / D D / Y Y Y Y	in the State of
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(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
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Election on	M M / D D / Y Y Y Y	in the State of
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5. Covering Period M M / D D / Y Y Y Y 10 01 2005 through M M / D D / Y Y Y Y 10 31 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Deanne Nesburg

Signature of Treasurer

Date 11 02 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
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Only**FEC FORM 3X**
Rev. 12/2004